AMENDED IN ASSEMBLY MAY 26, 2005 AMENDED IN ASSEMBLY MAY 3, 2005 AMENDED IN ASSEMBLY APRIL 21, 2005 AMENDED IN ASSEMBLY APRIL 20, 2005 AMENDED IN ASSEMBLY APRIL 11, 2005

CALIFORNIA LEGISLATURE—2005-06 REGULAR SESSION

ASSEMBLY BILL

No. 10

Introduced by Assembly Member Daucher

December 6, 2004

An act to add Division 1.75 (commencing with Section 1195) to the Health and Safety Code, relating to health and care facilities.

LEGISLATIVE COUNSEL'S DIGEST

AB 10, as amended, Daucher. Inappropriate Appropriate facility placement of persons with disabilities. standards.

Existing law provides for the licensing and regulation of health facilities, including general acute care hospitals and skilled nursing facilities, by the State Department of Health Services.

This bill would require the Secretary of California Health and Human Services department to adopt, by July 1, 2007, a statewide uniform patient intake, discharge, and placement documentation tool, as defined, for discharge placement or facility placement evaluation of persons with disabilities and the elderly in compliance with the standards set forth in the United States Supreme Court decision in Olmstead v. L.C. by Zimring (1999) 527 U.S. 581, regarding community placement of persons with disabilities.

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Existing law requires the California Health and Human Services Agency to set standards for CalCareNet, a statewide internet-based application to help a consumer find state-licensed long-term care providers. Existing law requires *that* the agency recommend to the Legislature standards for care navigation, to link consumers to necessary long-term care services and caregivers.

This bill would require the California Health and Human Services Agency agency to select 3 voluntary pilot projects to be allowed to charge a fee for long-term care navigation services. The fee would be voluntary and would be charged to non-Medi-Cal seniors and disabled persons with disabilities who are at risk for nursing home placement and would like long-term care navigation services. The bill would declare that, upon appropriation by the Legislature, the fee revenue would serve as matching federal targeted case-management dollars to provide funding for Medi-Cal eligible seniors and disabled persons at risk of nursing home placement to receive the same long-term care navigation services as persons who utilize the private pay method. This bill would also require the department to seek a federal waiver, to be drafted by a 3rd party, in order to implement the pilot programs.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Division 1.75 (commencing with Section 1195) is added to the Health and Safety Code, to read:

DIVISION 1.75. FACILITY PLACEMENT STANDARDS

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1195. In order to ensure that persons with disabilities and the elderly are not unnecessarily institutionalized, in compliance with the standards set forth in the decision of the United States Supreme Court in Olmstead v. L.C. by Zimring (1999) 527 U.S. 581, the Secretary of the California Health and Human Services Agency department, in consultation with organizations representing consumers who are elderly or disabled and other interested stakeholders, shall, by July 1, 2007, adopt a statewide uniform documentation tool for discharge placement or facility placement evaluation of disabled persons persons with disabilities and the elderly to guide the patient intake, discharge,

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and placement process so as to ensure community integration of persons with disabilities *and the elderly* and comparability of services to compare the characteristics of the facility's population against those who reside in the community. *The department shall adopt nonemergency regulations for purposes of developing the statewide uniform documentation tool.*

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- 1196. (a) The California Health and Human Services Agency shall select three voluntary pilot programs that shall be allowed to charge a fee for long-term care navigation services, as defined in subdivision (b) and paragraph (1) of subdivision (c) of Section 9251 of the Welfare and Institutions Code. The fee would shall be charged to non-Medi-Cal seniors and disabled persons persons with disabilities who want long-term care navigation services and are at risk for nursing home placement. The fee and services are voluntary.
- (b) (1) The fee revenue, upon appropriation by the Legislature, shall serve as the match for Federal Targeted Case Management dollars. The State Department of Health Services department shall ensure the fee revenue is collected in such a way as to meet all federal guidelines so as to qualify for the matching federal dollars. The State Department of Health Services shall seek a federal waiver to implement the pilot programs. The uniform documentation tool shall be adopted by the agency as non-emergency regulations. The statewide uniform documentation tool for discharge placement or facility placement evaluation created by the California Health and Human Services Agency pursuant to this section shall be used for long-term care navigation services provided after the fee permitted by this section is implemented. The matching federal targeted case-management dollars shall, upon appropriation by the Legislature, be used to provide funding for Medi-Cal eligible seniors and disabled persons at risk for nursing home placement who desire navigation services, to receive the same long-term care navigation services as persons who utilize the private pay method. The matching federal targeted case-management dollars shall, upon appropriation by the Legislature, be used to provide funding for Medi-Cal eligible seniors and persons with disabilities at risk for nursing home placement who desire navigation services, to receive the same long-term care

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navigation services as persons who utilize the private pay 2 method.

- (2) Targeted case management under this section is not intended to supplant the case management dollars and slots already available in California.
- (c) The agency shall evaluate the three pilot programs to ensure that the uniform placement tool-adopted by the agency developed by the department and implemented by the pilot programs is in accordance with the standards requiring a public entity to administer services, programs, and activities in the most integrated setting, as set forth in Olmstead v. L.C. by Zimring (1999) 527 U.S. 581. The agency shall submit its evaluation to the appropriate Legislative committees.
- (d) The three pilot programs shall ensure that appropriate training is provided to those implementing the statewide uniform documentation tool.
- (e) (1) The department shall seek a federal waiver to implement the pilot programs. The federal waiver shall be drafted by a third party.
- (2) This section shall only be implemented if the federal waiver specified in paragraph (1) is approved, and the department develops the statewide uniform documentation tool specified in Section 1195.
- (d) For the purposes of this division, "uniform documentation tool" includes, but is not limited to, identification of the consumer's medical, social, personal, and supportive needs and preferences for services. The three pilot program shall ensure that appropriate training is provided to those implementing the uniform documentation tool.
- 30 1197. For purposes of this division, the following definitions 31
- (a) "Department" means the State Department of Health 33 Services.
 - (b) "Uniform documentation tool" includes, but is not limited to, identification of the consumer's medical, social, personal, and supportive needs and preferences for services.